



TREATMENT PROTOCOL: HYPOTHERMIA

1. Basic airway
2. Pulse oximetry
3. Oxygen prn
4. Assist respirations prn
5. CPR prn
6. Cardiac monitor: document rhythm and attach ECG strip if dysrhythmia identified
7. Advanced airway prn
8. Provide warming measures prn
 - Move to warm environment
 - Use warmed NS when possible
 - Remove any wet clothing and wrap in warm blankets
 - Use warm humidified oxygen if possible

FROSTBITE	ALTERED LOC	FULL ARREST
9. Handle affected area gently 10. Remove constrictive jewelry 11. Cover and protect affected area 12. Do not allow affected area to thaw and then refreeze	9. Venous access 10. Blood glucose test 11. If blood glucose is less than 60mg/dl: Dextrose 50% 50ml slow IV push or 10% 250mL IVPB  Pediatric: See Color Code Drug Doses/L.A. County Kids Dextrose 10% 5mL/kg IV <i>Patient's weight <24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg</i> <i>Patient's weight ≥24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg</i> 12. ESTABLISH BASE CONTACT (ALL) 13. If hypotensive: Normal Saline fluid challenge 10mL/kg IV at 250ml	9. Venous access 10. Blood glucose test 11. If blood glucose is less than 60mg/dl: Dextrose 50% 50ml slow IV push or 10% 250mL IVPB  Pediatric: See Color Code Drug Doses/L.A. County Kids Dextrose 10% 5mL/kg IV <i>Patient's weight <24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg</i> <i>Patient's weight ≥24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg</i> 12. ESTABLISH BASE CONTACT (ALL) 13. See Ref. No. 1210, Non-Traumatic Cardiac Arrest Treatment Protocol ①②

TREATMENT PROTOCOL: HYPOTHERMIA

	increments Use caution if rales present	
--	---	--

SPECIAL CONSIDERATIONS

- ❶ If hypothermia is suspected, defibrillate only once, administer only one dose of epinephrine and **no other medications** should be administered until the patient is re-warmed.
- ❷ If hypothermia is suspected, resuscitation efforts should not be abandoned until the patient is re-warmed or the base hospital orders termination of resuscitative efforts; however, if hypothermia is suspected with submersion greater than 1 hour, consider utilizing Reference No. 814, Determination/Pronouncement of Death in the Field.